

Specialty/Sub-specialty information

Provider Type 10

Behavioral Health Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
012	Community Support	FAO		Agency	X		X	Approval by BDS for each Specialty/Subspecialty
	208 Community Support Case Management							
	218 Individual / Group Services							
	230 Dual Diagnosis - Individual / Group							
	231 Dual Diagnosis -Case Management							
	232 Intensive Case Management							
	233 ACT							
	234 In-home Transition Living Skills							
	235 In-home Intensive Living Skills							
	236 Medication Services							
	386 Community Integration Services							
	387 Intensive Community Integration							
	388 Daily Living Support Services							
	389 Skills Development Services							
	390 Skills Development							
	391 Day Support Services							
	392 Family Psychoeducation							
	393 Wellness Recovery Action Planning							
	394 Recovery Workbook Group							
	395 Trauma Recovery and Empowerment							
	396 Dialectical Behavior Therapy							
	397 Psychiatric Medication Education							
013	LCPC	Ind		Professional				
013	LCPC	Group		No				Need to enroll at least 2 licensed professionals
028	Mental Health Agency	Ind		Professional			X	Approval by BDS
	168 Independent Behavioral Specialist I							
028	Mental Health Agency	Group		No			X	Approval by BDS
	168 Independent Behavioral Specialist I							

Provider Type 10

Provider Documentation Requirements

Behavioral Health Services, cont.

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
028 Mental Health Agency		FAO		Agency	X		X	Approval by BDS for each Specialty/Subspecialty
	168 Independent Behavioral Specialist I							
	242 Children's Emergency							
	244 Children's Day Treat. - Per Diem							
	246 Children's Crisis Resolution							
	248 Children's Crisis Support - Hourly							
	249 Children's Crisis Support - Per Diem							
	250 Infant Mental Health							
	251 Children's Outpatient							
	252 Child. Fam. & Com. Support							
	253 Child. Fam. & Com. Supp - Per Diem							
	254 Children's Behavioral Health							
	255 Children's Fam. Psych. Treatment							
	256 Children's ACT							
	257 Children's Medication							
	258 Adult Outpatient							
	259 Adult Crisis Intervention							
	260 Adult Crisis Support - Out of Home							
	261 Adult Crisis Support - In Home							
	262 Adult Medication							
	263 Adult Family Psych. Treatment							
	265 Adult Emergency							
	416 MR Waiver Services							
038 Psychologist		Ind		Professional				
	416 MR Waiver Services							
038 Psychologist		Group		No				Need to enroll at least 2 licensed professionals
	416 MR Waiver Services							

Provider Type 10

Behavioral Health Services, cont.

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>048 Substance Abuse Services</i>		FAO		Agency			X	Approval by BDS for each Specialty/Subspec.
	264 Outpatient							
	266 Methadone Maintenance							
	334 Intensive Outpatient - Group							
	335 Intensive Outpatient - Individual							
	336 Intensive Outpatient - Family							
	337 Physician/Addiction Certified							
	338 Psychologist/Addiction Certified							
	340 LCSW/Addiction Certified							
	341 Psych Nurse/Addiction Certified							
	342 LADC/Addiction Certified							
	343 LSW/Addiction Certified (Servicing)							
	344 CCNS/Addiction Certified							
	345 LCPC/Addiction Certified							
	346 LPC/Addiction Certified (Servicing)							
	348 LMSW/Addiction Certified							
<i>062 Home Based Mental Health</i>		FAO		Agency	X		X	Approval from State Agency
	239 BCFS Contracted Agency							
	240 DOC Contracted Agency							
	241 BDS Contracted Agency							
<i>066 Developmental & Behavioral</i>		FAO		Agency			X	Approval by BDS for each Specialty/Subspec.
	237 Dev. & Behavioral Evaluation Serv.							
	238 Child Abuse Evaluation. Serv.							
	472 Infants Mental Health Evaluation							
<i>160 LCSW</i>		Ind		Professional				
<i>160 LCSW</i>		Group		No				Need to enroll at least 2 licensed professionals
<i>161 Psych Examiner</i>		Ind		Professional				
<i>161 Psych Examiner</i>		Group		No				Need to enroll at least 2 licensed professionals
<i>438 Non-MaineCare Covered Services</i>		Ind		Professional	X		X	Approval by BDS
<i>438 Non-MaineCare Covered Services</i>		Group		No	X		X	Approval by BDS. Need to enroll at least 2 licensed professionals

Provider Type 10

Provider Documentation Requirements

Behavioral Health Services, cont.

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
438 Non-MaineCare Covered Services		FAO		Agency	X		X	Approval by BDS for each Specialty/Subspec.
	439 Social Clubs and Drop In Centers							
	440 Recreation, Social and Leisure							
	441 Self-Help							
	442 Respite							
	443 Wrap Around Flex Funds							
	444 Warm Lines (MH Only)							
	445 Telephone Services							
	446 Specialized Direct Service							
	447 Supported Housing							
	448 Supported Education							
	450 Sheltered Employment							
	451 Managed Word							
	452 Adaptive Equipment							
	453 Advocacy							
	454 Alternative Dispute Resolution							
	455 Fiduciary							
	456 Guardianship							
	457 Interpretation and Communication							
	458 Rental Subsidies							
	459 Transportation Services							
	460 PNMI Room & Board							
	461 Outreach							
	462 Specialized Group Services							
	463 MR Case Management							
	464 ICF/MR Day Program							
	465 Crisis Stabilization - In Home							
	466 Crisis Stabilization - Mobile Response							
	467 Crisis Stabilization - Residential							
	468 Diagnosis and Evaluation							
478 Licensed Marriage & Family Therapist		Ind		Professional				
478 Licensed Marriage & Family Therapist		Group		No				Need to enroll at least 2 licensed professionals

Provider Type 11
Chiropractic Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
032 Chiropractor		Ind		Professional				
032 Chiropractor		Group		No				Need to enroll at least 2 licensed professionals.

Provider Type 12
Dental Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
009 Dentist		Ind		Professional				
	109 General Practice							
	219 Dental Public Health							
	220 Endodontics							
	221 Oral Pathology							
	222 Oral Surgery							
	223 Orthodontics							
	224 Pedodontics							
	225 Periodontics							
	226 Prosthodontics							
009 Dentist		Group		No				Need to enroll at least two licensed professionals
	109 General Practice							
	219 Dental Public Health							
	220 Endodontics							
	221 Oral Pathology							
	222 Oral Surgery							
	223 Orthodontics							
	224 Pedodontics							
	225 Periodontics							
	226 Prosthodontics							

Provider Type 12
Dental Services, cont.

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
104 Denturist/Private		Ind		Professional				
104 Denturist/Private		Group		No				Need to enroll at least 2 licensed professionals
105 Denturist/Public		Ind		Professional				
105 Denturist/Public		Group		No				Need to enroll at least 2 licensed professionals
106 Dental Hygiene School		FAO		Professional			X	Public Health letter of supervision
107 Dental Clinic		FAO		Professional				
317 Public Health Supervision							X	Public Health letter of supervision

Provider Type 15
Eye & Vision Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
037 Optometrist		Ind		Professional				
037 Optometrist		Group		No				Need to enroll at least 2 licensed professionals
042 Optician		Ind		Professional				
042 Optician		Group		No				Need to enroll at least 2 licensed professionals
	423 Hearing Aid Dealer Services							
157 Optical Lab (sole source)		FAO		No				OMS-Sole Service Contract

Provider Type 18**Provider Documentation Requirements****Pharmacy/ DME Suppliers**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
010 Pharmacy		FAO	NABP	Agency				
	413 DME/Supplies Services							
	414 Prosthetics/Orthotics Services							
	423 Hearing Aid Dealer Services							
	469 Specialty Drugs							
	470 Mail Order/Direct Supply Drug							
	471 Mail Order/Other							
	475 Maine Rx Plus							
	477 Low Cost Drugs							
	413 DME/Supplies Services							
	414 Prosthetics/Orthotics Services							
016 DME/Supplies		FAO		No				Must have storefront in Maine
	423 Hearing Aid Dealer Services							
017 Prosthetics/Orthotics		FAO		Professional				

Provider Type 20

Provider Documentation Requirements

Physicians/Assistants/Nursing

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
006 Physician		Ind	CLIA	Professional				CLIA required for laboratory services
006 Physician		Group	CLIA	No				Need to enroll at least 2 licensed professionals CLIA required for laboratory services
	109 General Practice							
	110 Family Practice							
	111 Anesthesiology							
	112 OB/GYN							
	113 Psychiatry			Board				Board certification of specialty
	114 Preventive Medicine							
	115 Pediatric Medicine							
	116 Nuclear Medicine							
	117 Geriatric Medicine							
	118 Infectious Disease							
	119 Addiction Medicine							
	120 Cardiology							
	121 Cardiac Surgery							
	122 Critical Care (intensivists)							
	123 Neurology							
	124 Neurosurgery							
	125 Allergy/Immunology							
	126 Dermatology							
	127 Emergency Medicine							
	128 Endocrinology							
	129 Pathology							
	130 Gastroenterology							
	131 Hematology							
	132 Internal Medicine							
	133 Nephrology							
	134 Hematology/Oncology							
	135 Medical Oncology							
	136 Surgical Oncology							

Provider Type 20

Provider Documentation Requirements

Physicians/Assistants/Nursing, cont.

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
006 Physician, cont.		Ind	CLIA	Professional				CLIA required for laboratory services
006 Physician, cont.		Group	CLIA	No				Need to enroll at least 2 licensed professionals CLIA required for laboratory services
	137 Radiation Oncology							
	138 Ophthalmology							
	139 Orthopedic Surgery							
	140 Osteopathic Manipulative Therapy							
	141 Otolaryngology							
	142 Physical Medicine & Rehabilitation							
	143 Pulmonary Disease							
	144 Diagnostic Radiology							
	145 Interventional Radiology							
	146 Rheumatology							
	147 General Surgery							
	148 Plastic & Reconstructive Surgery							
	149 Colorectal Surgery							
	150 Thoracic Surgery							
	151 Vascular Surgery							
	152 Peripheral Vascular Surgery							
	153 Neuropsychiatry							
	154 Maxillofacial Surgery							
	155 Hand Surgery							
	156 Urology							
	320 Asthma							
	326 Diabetes							
046 Audiologist		Ind.		Professional				
046 Audiologist		Group		No				Need to enroll at least 2 licensed professionals
053 Nurse Midwife		Ind.		Professional				
053 Nurse Midwife		Group		No				Need to enroll at least 2 licensed professionals
060 Nurse Practitioner		Ind.		Professional				Board certification of specialty
060 Nurse Practitioner		Group		No				Need to enroll at least 2 licensed professional

Provider Type 20**Provider Documentation Requirements****Physicians/Assistants/Nursing, cont.**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
196 Certified Nurse Anesthetist		Ind		Professional				CLIA required for laboratory services
196 Certified Nurse Anesthetist		Group		No				Need to enroll at least 2 licensed professionals
197 Certified Clinical Nurse		Ind.	Board	Professional				Board certification of specialty
197 Certified Clinical Nurse		Group		No				Need to enroll at least 2 licensed professionals

Provider Type 21

Provider Documentation Requirements

Podiatry

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
007 Podiatrist		Ind		Professional				
007 Podiatrist		Group		No				Need to enroll at least 2 licensed professionals

Provider Type 22

Provider Documentation Requirements

Rehabilitative and Restorative Services

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
031 Physical Therapist		Ind		Professional				
031 Physical Therapist		Group		No				Need to enroll at least 2 licensed professionals
031 Physical Therapist		FAO		Professional				
	413 DME/Supplies							
	416 MR Waiver Services						X	Approval by BDS
033 Occupational Therapist		Ind		Professional				
033 Occupational Therapist		Group		No				Need to enroll at least 2 licensed professionals
033 Occupational Therapist		FAO		Professional				
	416 MR Waiver Services						X	Approval by BDS
035 Freestanding Day Hab		FAO		Agency				Approval by BDS
	306 Adult Services						X	Approval by BDS
	307 Children's Services						X	Approval by BDS
	416 MR Waiver Services						X	Approval by BDS
035 Day Health Services		FAO		Agency			X	Approval by Assisted Living
035 Rehabilitation Services		FAO	CARF/CORF	No	X			
035 Home based services for children		FAO		No	X		X	Approval by BDS

Provider Type 23**Provider Documentation Requirements****Speech, Language & Hearing Services**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
027 Speech & Hearing Agency		FAO		Professional				
	416 MR Waiver Services							Approval by BDS
	423 Hearing Aid Dealer Services							Approval by BDS
045 Hearing Aid Dealer		Ind.		Professional				
045 Hearing Aid Dealer		Group		No				Need to enroll at least 2 licensed professionals
046 Audiologist		Ind.		Professional				
	416 MR Waiver Services							Approval by BDS
	423 Hearing Aid Dealer Services							Approval by BDS
046 Audiologist		Group		No				Need to enroll at least 2 licensed professionals
	416 MR Waiver Services							Approval by BDS
	423 Hearing Aid Dealer Services							Approval by BDS
046 Audiologist		FAO		Professional				Need licensed service provider
	416 MR Waiver Services							Approval by BDS
	423 Hearing Aid Dealer Services							Approval by BDS
047 Speech Language Pathologist		Ind		Professional				Need licensed service provider
	416 MR Waiver Services							Approval by BDS
047 Speech Language Pathologist		Group		No				Need to enroll at least 2 licensed professionals
	416 MR Waiver Services							Approval by BDS
047 Speech Language Pathologist		FAO		Professional				Need licensed service provider.
	416 MR Waiver Services							Approval by BDS

Provider Type 24
State Psych Hospital

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
002 Inpatient Psych		FAO		Facility	X			
064 Outpatient Psych		FAO		Facility	X			

Provider Type 25
Private Psych Hospital

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
002 Inpatient Psych		FAO		Facility	X			
064 Outpatient Psych		FAO		Facility	X			

Provider Type 26

Provider Documentation Requirements

Ambulatory Health Care

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
018 Ambulatory Surgical Center		FAO	Medicare					
025 Family Planning Agency		FAO	Medicare		X			
030 Ambulatory Care Clinic		FAO			X			
	034 School Health							
	041 Well Child Health							
	423 Hearing Aid Dealer Services							
043 Rural Health Clinic		FAO	Medicare		X			
	409 Physician Services							
	410 Podiatry Services							
	411 Dental Services							
	421 Optometry Services							
	422 Psychological							
044 VD Screening		FAO					X	Approval by Family Planning Org.
063 FQHC		FAO	HRSA		X			
	409 Physician Services							
	410 Podiatry Services							
	411 Dental Services							
	412 Community Support Services							
	413 DME/Supplies Services							
	415 Case Management Services							
	417 Physical Therapy Services							
	418 Chiropractor Services							
	419 Occupational Therapy Services							
	421 Optometry Services							
	422 Psychological Services							
	423 Hearing Aid Dealer Services							
	424 Audiology Services							
	426 Services for Substance Abuse							
	427 Nurse Midwife Services							
	428 Psych Examiner Services							
433 Dialysis Center		FAO		Facility				Affiliated physician license needed

Provider Type 28**Provider Documentation Requirements****Hospitals**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
001 General Inpatient		FAO	CLIA	Facility	X			
004 General Outpatient		FAO	CLIA	Facility	X			
006 Physician		FAO		Facility	X			
	414 Prosthetics/Orthotics Services							
	416 MR Waiver Services							
009 Dentist		FAO		Facility	X			
010 Pharmacy		FAO		Facility	X			
023 Swing Beds		FAO		Facility	X			
029 Ambulance		FAO		Facility	X			
103 Distinct Part Unit		FAO		Facility	X			
	313 Psych Unit							
	314 Skilled Nursing Unit							

Provider Type 29
Laboratory Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
014 Independent Laboratory		FAO	CLIA	Agency				
158 Molecular Screening/Genetic		FAO	CLIA	Agency				

Provider Type 31**Provider Documentation Requirements****Nursing & Custodial Care/ Boarding Homes**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>003 Nursing Facility</i>		FAO		Facility	X			
	372 Case Mix							
	373 Non Case Mix							
	417 Physical Therapy Services							
	419 Occupational Therapy Services							
	425 Speech Language Pathology							
<i>039 Private Non Medical Institute</i>		FAO		Facility	X		X	Approval by Agency paying State seed
	267 Medical and Remedial & LOA							
	268 Room and Board & LOA							
	269 Med. & Remedial PC & LOA							
	271 Substance Abuse Detox & LOA							
	273 Sub. Abuse Personal Care & LOA							
	274 Sub. Abuse Res Rehab & LOA							
	275 Subs.Abuse Halfway House & LOA							
	276 Subs. Abuse Ext. Care Shelter & LOA							
	277 Subs. Abuse Adol. Res Rehab &							
	278 Subs. Abuse Ext. Shelter & LOA							
	279 Residential Child Care - DHS & LOA							
	280 Com. Res. Men. Ill - Rehab Serv.							
	281 Com. Res. Men. Ill - Personal Care							
	283 Residential Child Care - BDS &							
	352 MR Medical & Remedial personal							
	353 MR Medical & LOA							
	354 MR Room & Board & LOA							
	375 Non-Case Mix Medical & LOA							
	376 Non-Case Mix Room & Board							
	377 Non-Case Mix Medical & LOA							
<i>039 Private Non Medical Institute</i>		FAO		Facility	X		X	Approval by BDS
	285 Redirect Rm & Board & LOA							

Provider Type 31**Provider Documentation Requirements****Nursing & Custodial Care/ Boarding Homes, cont.**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
040 ICF/MR		FAO		Facility	X			
	416 MR Waiver Services							
	417 Physical Therapy Services							
	419 Occupational Therapy Services							
	420 Freestanding Day Hab. Services							
	425 Speech Language Pathology							
	429 Respite Care Services							
169 Adult Family Care		FAO		Facility				
	287 Adult Family Care Home							
	357 AFC Rm. and Board							
289 Respite Care		FAO		Facility	X		X	Approval by Agency paying State seed
479 Assisted Living Services		FAO		Facility			X	BEAS Contract

Provider Type 34**Provider Documentation Requirements****Transportation/Ambulance**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
015 Full Service Transportation		FAO		No	X			Approval from Financial Services
	416 MR Waiver Services							Approval by BDS
029 Ambulance		FAO		Agency	X			
	228 Land Ambulance							
	229 Air Ambulance							
215 Wheelchair Van		FAO		No	X			Approval from Financial Services

Provider Type 37
Home Care Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
011 Home Health Agency		FAO	Medicare	Agency				Approval from Lic. & Cert.
	416 MR Waiver Services							Approval by BDS
021 Hospice		FAO	Medicare	Agency				
055 Consumer Directed Attendant Services		FAO		No			X	Approval by Dept. of Labor
058 Private Duty Nursing		FAO		Agency				
	304 Agency							Approval by BDS
058 Private Duty Nursing		Ind.		Professional				
058 Private Duty Nursing		Group		No				
	305 Private Practice							
059 Personal Care Services		FAO		No				These services are part of PDN - Agency
349 Adult PDN Services - Agency		FAO		No			X	Approval by BEAS
349 Adult PDN Services - Private		Ind		No			X	Approval by BEAS
349 Adult PDN Services - Private		Group		No			X	Approval by BEAS
349 Adult PDN Services - Personal		FAO		No			X	Approval by BEAS

Provider Type 42**Provider Documentation Requirements****BDS-MR Bureau**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
024 Case Management		FAO		NO	X		X	Approval by BDS
026 MR Waiver		FAO		NO			X	Approval by BDS
027 Speech & Hearing Agency		FAO		Professional			X	Approval by BDS/Licensed Speech Pathologist
031 Physical Therapist		FAO		Professional			X	Approval by BDS/Licensed Physical Therapist
033 Occupational Therapist		FAO		Professional			X	Approval by BDS/Licensed Psychologist
038 Psychologist		FAO		Professional			X	Approval by BDS/Licensed Speech Pathologist

Provider Type 45**Provider Documentation Requirements****Non-Medicaid Vendor**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
003 Nursing Facility		Non-Med		Facility	X		X	Approval by Agency enrolling provider
	372 Case Mix							
	373 Non Case Mix							
	417 Physical Therapy Services							
	419 Occupational Therapy Services							
	425 Speech Language Pathology							
009 Dentist		Non-Med		Professional			X	Approval by Agency enrolling provider
	109 General Practice							
	209 Interpreter Services							
	219 Dental Public Health							
	220 Endodontics							
	221 Oral Pathology							
	222 Oral Surgery							
	224 Pedodontics							
	225 Periodontics							
	226 Prosthodontics							
012 Community Support		Non-Med		Agency	X		X	Approval by Agency enrolling provider
	232 Intensive Case Management							
	233 ACT							
	386 Community Integration Services							
	387 Intensive Community Integration							
	388 Daily Living Support Services							
	389 Skills Development Services							
	390 Skills Development							
	391 Day Support Services							
	392 Family Psychoeducation							
	393 Wellness Recovery Action Planning							
	394 Recovery Workbook Group							
	395 Trauma Recovery and Empowerment							
	396 Dialectical Behavior Therapy							
	397 Psychiatric Medication Education							

Provider Type 45, Non-Medicaid Vendor, cont.**Provider Documentation Requirements**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>026 MR Waiver</i>		Non-Med		Agency/Prof	X		X	Approval by agency enrolling provider
	056 Waivered BH Rm and Bd							
	102 Consultative Services							
	290 Communication Aids							
	291 Crisis Intervention							
	292 Day Habilitation							
	293 Environmental Mod							
	294 Personal Support Services							
	295 Res. Training Level I thru III							
	296 Res. Training Level IV							
	297 Residential BH							
	298 Transportation							
	299 Supported Employment							
	381 Adaptive Aids							
	382 Daily Living Skills							
	429 Respite Care Services							
<i>028 Mental Health Agency</i>		Non Med		Agency	X		X	Approval by agency enrolling provider
	242 Children's Emergency							
	244 Children's Day Treat. - Per Diem							
	246 Children's Crisis Resolution							
	248 Children's Crisis Support - Hourly							
	249 Children's Crisis Supp. - Per Diem							
	251 Children's Outpatient							
	252 Child. Fam. & Com. Support							
	253 Child. Fam. & Com. Supp - Per Diem							
	254 Children's Behavioral Health							
	256 Children's ACT							
	257 Children's Medication							
	258 Adult Outpatient							
	259 Adult Crisis Intervention							
	260 Adult Crisis Support - Out of Home							
	261 Adult Crisis Support - In Home							

Provider Type 45

Provider Documentation Requirements

Non-Medicaid Vendor, cont.

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
028 Mental Health Agency, cont.		Non Med		Agency	X		X	Approval by agency enrolling provider
	262 Adult Medication							
	265 Adult Emergency							
	416 MR Waiver Services							
	457 Interpretation and Communication							
035 Freestanding Day Hab		Non-Med		Agency	X		X	Approval by agency enrolling provider
	306 Adult Services							
	307 Children's Services							
039 Private Non Medical Institute		Non-Med		Agency	X		X	Approval by agency enrolling provider
	280 Com. Res. Men. Ill - Rehab Serv.							
	281 Com. Res. Men. Ill - Personal Care							
	283 Residential Child Care – BDS & LOA							
	285 Redirect Rm and Board & LOA							
	352 MR Medical & Remedial personal care and LOA							
	353 MR Medical & LOA							
	354 MR Room and Board & LOA							
	398 MR Medical Leave Day							
	400 Leave Days for People with Mental							
	402 Child Care Facility Leave Days							
	403 MR Room and Board Leave Day							
	457 Interpretation and Communication							
040 ICF/MR		Non-Med		Agency	X		X	Approval by agency enrolling provider
	416 MR Waiver Services							
	417 Physical Therapy Services							
	419 Occupational Therapy Services							
	420 Freestanding Day Hab Services							
	425 Speech Language Pathology							
	429 Respite Care Services							

Provider Type 45**Provider Documentation Requirements****Non-Medicaid Vendor, cont.**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
048 Substance Abuse Services		FAO		Agency	X		X	Approval by agency enrolling provider
	264 Outpatient							
054 Child Health		Non-Med		Agency			X	Approval by agency enrolling provider
054 Child Health		Non-Med		Professional			X	Approval by agency enrolling provider
062 Home Based Mental Health		Non-Med		Agency	X		X	Approval by agency enrolling provider
	241 BDS Contracted Agency							
068 Optional EPSDT Provider		Non-Med		Agency			X	Approval by agency enrolling provider
068 Optional EPSDT Provider		Non-Med		Professional	X		X	Approval by agency enrolling provider
070 BDS		Non-Med		Agency			X	Approval by agency enrolling provider
070 BDS		Non-Med		Professional			X	Approval by agency enrolling provider
104 Denturist/Private		Non-Med		Professional			X	Approval by agency enrolling provider
105 Denturist/Public		Non-Med		Professional			X	Approval by agency enrolling provider
106 Dental Hygiene School		Non-Med		Professional			X	Approval by agency enrolling provider
107 Dental Clinic		Non-Med		Professional			X	Approval by agency enrolling provider
185 13.12 Children & Adolescents with		Non-Med		Agency	X		X	Approval by agency enrolling provider
	361 Other Agency Designated by BDS							
317 Public Health Supervision		Non-Med		Professional			X	Approval by agency enrolling provider
355 BCFS		Non-Med		Agency			X	Approval by agency enrolling provider
355 BCFS		Non-Med		Professional			X	Approval by agency enrolling provider
356 BEAS		Non-Med		Agency			X	Approval by agency enrolling provider
356 BEAS		Non-Med		Professional			X	Approval by agency enrolling provider

Provider Type 45**Provider Documentation Requirements****Non-Medicaid Vendor, cont.**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
438 NonMaineCare Covered Services		Non-Med		Agency			X	Approval by agency enrolling provider
438 NonMaineCare Covered Services		Non-Med		Professional	X		X	Approval by agency enrolling provider
	439 Social Clubs and Drop In Centers							
	440 Recreation, Social and Leisure							
	441 Self-Help							
	442 Respite							
	443 Wrap Around Flex Funds							
	444 Warm Lines (MH only)							
	445 Telephone Services							
	446 Specialized Direct Service							
	447 Supported Housing							
	448 Supported Education							
	450 Sheltered Employment							
	451 Managed Word							
	452 Adaptive Equipment							
	453 Advocacy							
	454 Alternative Dispute Resolution							
	455 Fiduciary							
	456 Guardianship							
	457 Interpretation and Communication							
	458 Rental Subsidies							
	459 Transportation Services							
	460 PNMI Room & Board							
	461 Outreach							
	462 Specialized Group Services							
	463 MR Case Management							
	464 ICF/MR Day Program							
	465 Crisis Stabilization - In Home							
	466 Crisis Stabilization -Mobile Response							
	467 Crisis Stabilization - Residential							
	468 Diagnosis and Evaluation							

Provider Type 49**Provider Documentation Requirements****Indian Health Services**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
210 Indian Health Services		FAO		No	X			Contract with Indian Affairs
	409 Physician Services							
	410 Podiatry Services							
	411 Dental Services							
	412 Community Support Services							
	413 DME/Supplies Services							
	415 Case Management Services							
	417 Physical Therapy Services							
	418 Chiropractic Services							
	419 Occupational Therapy Services							
	421 Optometry Services							
	422 Psychological Services							
	423 Hearing Aid Dealer Services							
	424 Audiology Services							
	426 Services for Substance Abuse							
	427 Nurse Midwife Services							
	428 Psych Examiner Services							

Provider Type 50
Waiver Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>022 Physically Disabled</i>		FAO		No	X		X	Approval by BDS
	301 Case Management Services							
	302 Consumer Instruction							
	303 PCA							
<i>026 MR Waiver</i>								
	102 Consultative Services	Group		No	X		X	Approval by BDS; must have at least two licensed profs.
	102 Consultative Services	Ind		Professional	X		X	Approval by BDS
	290 Communication Aids	FAO		No	X		X	Approval by BDS
	290 Communication Aids	Ind		No	X		X	Approval by BDS
	291 Crisis Intervention	FAO		Agency	X		X	Approval by BDS
	291 Crisis Intervention	Ind		Professional	X		X	Approval by BDS
	291 Crisis Intervention	Group		No	X		X	Approval by BDS; must have at least two licensed profs.
	292 Day Habilitation	FAO		No	X		X	Approval by BDS
	292 Day Habilitation	Ind		No	X		X	Approval by BDS
	293 Environmental Modification	FAO		No	X		X	Approval by BDS
	293 Environmental Modification	Ind		No	X		X	Approval by BDS
	294 Personal Support Services	FAO		No	X		X	Approval by BDS
	294 Personal Support Services	Ind		No	X		X	Approval by BDS
	296 Res. Training Level I-IV	FAO		Agency	X		X	Approval by BDS
	296 Res. Training Level I-IV	Ind		Agency	X		X	Approval by BDS
	297 Residential BH	FAO		Facility	X		X	Approval by BDS
	298 Transportation	FAO		No	X		X	Approval by BDS
	298 Transportation	Ind		No	X		X	Approval by BDS
	299 Supported Employment	FAO		No	X		X	Approval by BDS
	299 Supported Employment	Ind		No	X		X	Approval by BDS
	379 NonTraditional Communications	FAO		No	X		X	Approval by BDS
	379 NonTraditional Communications	Ind		No	X		X	Approval by BDS
	380 Noncommunication	Group		No	X		X	Approval by BDS
	380 Noncommunication	Ind		Professional	X		X	Approval by BDS

Provider Type 50***Provider Documentation Requirements******Waiver Services***

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>026 MR Waiver, cont.</i>								
	381 Adaptive Aids	FAO		No	X		X	Approval by BDS
	381 Adaptive Aids	Ind		No	X		X	Approval by BDS
	382 Daily Living Skills	FAO		Agency	X		X	Approval by BDS
	382 Daily Living Skills	Ind		Professional	X		X	Approval by BDS
	429 Respite Care Services	FAO		No	X		X	Approval by BDS
	429 Respite Care Services	Ind		No			X	Approval by BDS
<i>057 Elderly</i>		FAO		No	X		X	Approval by BDS
<i>214 Adults with Disabilities</i>		FAO		No			X	Approval by BDS

Provider Type 55

Provider Documentation Requirements

Education Related Services

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
065 Early Intervention		Ind.		No	X		X	Approval by CDS
065 Early Intervention		Group		No	X		X	Approval by CDS
065 Early Intervention		FAO		No	X		X	Approval by CDS
	308 Home Devel. Therapy							
	309 Special Purpose Program							
	310 Mainstream Program							
	311 Social Work Services							
	384 Special Purpose Prog. - 1to1 tier 1							
	385 Special Purpose Prog. - Ctr Based							
175 Day Treatment - Cert. Seed		FAO		Agency	X	X	X	Approval by Div. of Finance
176 School Based Rehab. - Cert. Seed		FAO		No		X		
177 School Based Fee for Service		FAO		Professional		X		
	243 Emergency Mental Health							
	417 Physical Therapy Services							
	419 Occupational Therapy Services							
	422 Psychological Services							
	425 Speech Language Pathology							
	428 Psych Examiner Services							
371 School Based Day Treatment		FAO		No	X	X	X	Approval by Div. Of Finance

Provider Type 56
Medical Imaging Services

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
330 Medical Imaging Services		FAO	Medicare	No	X		X	Supervision by Physician only

Provider Type 58
Case Management

Provider Documentation Requirements

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
178 13.05 Adults with Mental Retardation		FAO		No	X		X	Approval from agency paying seed
	241 BDS Contracted Agency							
	398 MR Medical Leave Day							
180 13.07 Persons with HIV Infection		FAO			X	X	X	Approval from agency paying seed
181 13.08 Infants & Children - Birth		FAO		No	X		X	Approval from agency paying seed
	358 Head Start Agencies							
	359 BOH							
	360 CDS							
182-13.09 Families of Children Who are abused/ neglected		FAO		No	X	X	X	Approval from agency paying seed
	239 BCFS Contracted Agency							
	355 BCFS - DHHS							
182-13.09 Families of Children who are abused/ neglected		FAO		No	X		X	Approval from agency paying seed
	399 Tribal Dept. of Human							
183 13.10 Children & Young Adults who are in Care		FAO		No	X	X	X	Approval from agency paying seed
	239 BCFS Contracted Agency							
	355 BCFS - DHHS							
183 13.10 Children & Young Adults Who Are in Care		FAO		No	X		X	Approval from agency paying seed
	399 Tribal Dept. of Human Services							
184 13.11 Adults in Need of Protective Services		FAO		No	X		X	Approval from agency paying seed
	Interpreter Services							
	435 BEAS Contracted Agency							

Provider Type 58

Provider Documentation Requirements

Case Management, cont.

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
185	13.12 Children & Adolescents w/ Emotional Disturbances	FAO		No	X		X	Approval from agency paying seed
	361 Other Agency Designated by BDS							
	362 BDS Children's Services							
	363 Level 1 BDS							
	364 Level 2 BDS							
	365 Level 3 BDS							
186	13.13 Children & Adolescents w/ Serious Emotional Disturbances	FAO		No	X		X	Approval from agency paying seed
	378 United Way							
187	13.14 Juvenile Corrections	FAO		No	X	X	X	Approval from agency paying seed
	318 DOC							
	368 Tracker							
	369 Jail Diversion							
188	13.15 Pregnant and/or Postpartum	FAO		No	X	X	X	Approval from agency paying seed
189	13.16 Adults with Long Term Care	FAO		No	X	X	X	Approval from agency paying seed
190	13.17 Residents of Kennebec, Knox, Somerset, Androscoggin	FAO		No	X	X	X	Approval from agency paying seed
	366 Maine Dartmouth							
	367 Housing							
191	13.18 Psychiatric Substance Dependency.	FAO		No	X	X	X	Approval from agency paying seed
192	13.19 Residents of Franklin, Oxford, Cumberland	FAO		No	X	X	X	Approval from agency paying seed
194	13.21 Healthy Families	FAO		No	X	X	X	Approval from agency paying seed
195	13.22 Disease Case Management	FAO		No	X		X	Approval from agency paying seed
	320 Asthma							
	326 Diabetes							
383	13.23 Persons Receiving Healthy Futures	FAO		No	X		X	Approval from agency paying seed